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PTO/SB/17 (10-07)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

As pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2008

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)315.00

Complete if Known

Application Number	<u>10/663,616</u>
Filing Date	<u>September 17, 2008</u>
First Named Inventor	<u>NABIL GHALY</u>
Examiner Name	<u>Alex P. Rada</u>
Art Unit	<u>3714</u>
Attorney Docket No.	<u> </u>

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☐ Deposit Account Deposit Account Number: Deposit Account Name:

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	<u> </u>
Design	210	105	100	50	130	65	<u> </u>
Plant	210	105	310	155	160	80	<u> </u>
Reissue	310	155	510	255	620	310	<u> </u>
Provisional	210	105	0	0	0	0	<u> </u>

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

 Total Claims Extra Claims Fee (\$) Fee Paid (\$)
- 20 or HP = x =

HP = highest number of total claims paid for, if greater than 20.

 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)
- 3 or HP = x = 315.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

 Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)
- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Fees Paid (\$)

SUBMITTED BY

Signature	<u>NABIL GHALY</u>	Registration No. (Attorney/Agent)	Telephone <u>(631) 549-0980</u>
Name (Print/Type)	<u>NABIL GHALY</u>	Date	<u>3/22/2008</u>

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



DR. NABIL N. GHALY
14 Longwood Drive
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March 22, 2008

Commissioner for Patents
Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Ref.: Utility Patent Application No. 10/663,616 - Amendment Prior To First Office Action

Dear Commissioner:

Transmitted herewith is Amendment Prior to First Office Action for the subject utility patent application.

The original application included 61 claims (4 independent claims, and 57 dependent claims). These 61 claims have now been cancelled, and 7 independent claims, and 54 dependent claims have been added by this amendment. Accordingly, attached please find a Fee Transmittal Form for the additional 3 independent claims, together with a credit card payment form in the amount of \$315.00. The Applicant claims small entity status pursuant to 37 CFR 1.27. Thank you for your cooperation and assistance in this matter.

Sincerely,

Dr. Nabil N. Ghaly

Attach.

Express mail ER 050731334 US
Return receipt requested



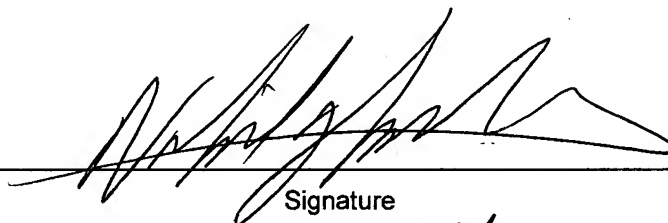
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Date



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NABIL GHALAY

Typed or printed name of person signing Certificate

Registration Number, if applicable

(631) 549-0980

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

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